02/11/2010 19:23

Image#1000011FICATION OF MULTICANDIDATE STATUS

(See reverse side for instructions) This form should be filed after the Committee qualifies as a multicandidate committee. 1. (a) NAME OF COMMITTEE IN FULL **BETTY PAC** (b) Number and Street Address PO BOX 14141 2. FEC IDENTIFICATION NUMBER C00405050 (c) City, State and ZIP Code TYPE OF COMMITTEEcheck one) STATE PARTY ST PAUL MN 55114 X OTHER I certify that **one** of the following situations is correct (complete line 4 or 5): STATUS BY AFFILIATION: The committee submitted its Statement of Organization (FEC FORM 1) and simultaneously qualified as a multicandidate committee through its affiliation with: Committee Name: FEC Identification Number: STATUS BY QUALIFICATION: 5. (a) candidates: The committee has made contributions to the five (5) federal candidates listed below (ONLY state party committees may leave this blank.): Name Office Sought State/District **Date** (i) TERESA ANN DALY 10/22/2004 House MN 02 (ii) **DEBORAH WATTS** 10/22/2004 House MN 03 (iii) PATTY WETTERLING House MN 06 10/22/2004 (iv) **EMANUEL II CLEAVER** 05 10/29/2004 House MO JAMES M SULLIVAN (v) House CT 02 10/29/2004 (b) Contributors: The committee received a contribution from its 51st contributor 01/07/2010 Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 10/08/2004 (d) Qualification: The committee met the above requirements on: I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete. TYPE OR PRINT NAME OF TREASURER DATE SIGNATURE OF TREASURER Electronically Filed by Jerry Samargia 02/10/2010 Jerry Samargia Text ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

For further information contact:
Federal Election Commission, Washington, DC 20463
Toll-free 800-424-9530
Local 202-694-1100

FEC FORM 1 M